

BOATER EDUCATION CARD APPLICATION

WWW.PARKS.WA.GOV/BOATING.ASP					PPLICATION TYPE (REQUIRED)
				1 NEW (\$10) 2 REPLACEMENT (\$5)	
PRINT	CHARACTERS	IN CAPITAL LETTER	RS USING A B	LACK OR BI	LUE PEN (REQUIRED)
LEGAL LAST NAM				FIRST NAME	M
				<u> </u>	
MAILING ADDRES	SS LINE 1				
MAILING ADDRES	SS LINE 2				1 1 1
				1 1 1	
CITY			STATE ZIP CODE		
DATE OF BIRTH (I	MMDDYYYY) HOME P	PHONE (INCLUDE AREA COI	DE) COUNTRY		1 1
					1 1
E-MAIL ADDRESS	(OPTIONAL)				
				1 1 1 1	
	MARK ON	E BOX ONLY FOR E	ACH SECTION	BELOW (R	EQUIRED)
GENDER	EYE COLOR	HAIR COLOR	COURSE TYP	E	
1 Male	1 Brown	1 Brown	1 Equiva	lency Exam	6 Other State Course
2 Female	2 Blue	2 Black		ate Home Stud	dy 7 Internet Course
	3 Green	3 Blonde	- -	an Red Cross	•
	4 Hazel	4 Red		wer Squadrons	_ , ,
	5 Gray	5 Gray/White		Auxiliary	J
	6 Black	6 N/A (Bald)		, taxiiiai y	
	O Diack				
			TION (OPTIO	•	
		e with you, we would like tage from the list below.	o know what the	main language s	spoken in your home is if other the
01 Spanish	n 04 🗆 Lao	07 Cambodian	10 Samoai	n 13 🗌	Japanese
02 Korean		08 Ukrainian	11 Vietnan	nese 14	Other Specify
03 Punjab	06 Tagalog	09 Somali	12 Chinese		отпол орост,
	00 ragalog	09 comaii	12 011000	3	
	THE FOLL	OWING ITEMS MUST	T ACCOMPAN	Y THIS APP	LICATION
1) Completed	APPLICATION.				
2) CHECK or	MONEY ORDER	for \$10 (new card) or	· \$5 (replaceme	ent card).	
,		,		,	ency Exam Certificate
		RETURNED. DO NO			
4) Mail to: WA	A. STATE PARK	S & RECREATION	COMMISSIO	N	Make payable to
BOATING PROGRAMS					Washington State Par
PO BOX 34333					(US \$ only)
SE	ATTLE, WA 981	124-1333			(OC \$ 0111y)
		DO NOT HOT OF	DI EC 05 5/5	EDOLIES	
		DO NOT USE STA			
		v that the statement ith are true and corr			true and correct and that a issued to me.
					\$
LECAL CICNIATI					AMOUNT ENGLOSED